

FACT SHEET



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

The Georgia Department of Community Health, State Office of Rural Health Rural Health Emergency Medical Services

The Medicare Rural Hospital Flexibility Program (Flex) was established by the Balanced Budget Act of 1997. This federally funded program of the U.S. Department of Health and Human Services (HHS) promotes quality and performance improvement activities; stabilizes rural hospital finance; and integrates emergency medical services (EMS) into rural health care systems.

The EMS Stemi Project

In response to need, the State Office of Rural Health (SORH) developed ST Elevated Myocardial Infarction (STEMI) education and training for Critical Access Hospital (CAH) Emergency Department (ED) and EMS personnel. The project spans three years with the long-term goal of providing STEMI education and training in 31 CAH/EMS communities. The goal is to improve the post-STEMI clinical outcomes in rural Georgia. Intensive education and training will be provided jointly to EMS and CAH ED personnel. The project promotes a team approach to meeting the various requirements for each entity, including 911 dispatchers.

EMS Education and Training

Previous projects of the EMS Education and Training Program include:

- Developed EMS Director Education and Training Pilot Program curriculum.
- Funded EMS Skills Evaluation Education and Training Grant.
- Purchased computer equipment for EMS Region 8.
- Purchased software licenses for EMS Region 8.
- Conducted rural EMS leadership education and training.



Georgia Flex Quick Facts

- Since 1999, Georgia has received more than \$5.5 million in Flex grant funding.
- Flex grants have supported the conversion and sustainability of 34 rural Georgia Critical Access Hospitals.



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An Overview of Rural Health Emergency Medical Services

As of September 2013, there have been more than 501,300 viewings of the 148 classes offered through the EMS Online Classroom. These training and educational sessions:

- Enhance communication between EMS and hospitals.
- Upgrade skill sets and evaluation processes.
- Improve management of rural EMS resources.
- Increase recognition of EMS as a vital member of the health care team.
- Improve pre-hospital patient care.

Health System Development and Community Engagement

Flex grant network-development projects helped several Critical Access Hospitals (CAH) develop their health systems and enhance their community engagement through:

- Improved health care delivery and access to specialty services.
- Shared resources to improve financial viability.
- Enhanced pre-hospital health care through increased EMS coordination.

These programs contributed to improved access to health care, better overall health of the community and its residents, and greater economic stability for the community.

About Flex

The Georgia Flex Program, which began in 1999 through the State Office of Rural Health (SORH) in the Georgia Department of Community Health (DCH), supports the four components of the national program:

- Quality Improvement
- Financial and Operational Improvement
- Health System Development and Community Engagement
- Conversion of 34 hospitals to CAH Status – Completed

For More Information

Visit www.dch.georgia.gov/state-office-rural-health or call 229-401-3090.